



03-02-09

IAP19 Rec'd PCT/PTO

PTO/SB/2007-008

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27 FEB 2009

Approved for use through 3/31/2008. OMB 0651-0031  
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional)  1963-9371US																								
Application Number 10/577,232		Filed April 26, 2006																								
For ECTOPARASITICIDAL FORMULATIONS OF SPINOSYNS AND AZOLE PESTICIDES																										
Art Unit 1623	Examiner E. Peslev																									
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03/03/2009 GFREY1 00000050 10577232

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1110.00 OP

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL for FY 2007

FEB 27 2009

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$ 1266.00)

Complete if Known	
Application Number	10/577,232
Filing Date	4/26/2006
First Named Inventor	Mertens et al.
Examiner Name	E. Peselev
Art Unit	1623
Attorney Docket No.	1963-9371US

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify) : \_\_\_\_\_

Deposit Account Deposit Account Number: 20-1469 Deposit Account Name: TraskBritt, PC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

Under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Small Entity	Fees Paid (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

**Small Entity**

Fee (\$) Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
23	-20 or HP= 3	x 52 =	156.00	Fee (\$)

HP = highest number of total claims paid for, if greater than 20.

**Fee (\$)** **Fee Paid (\$)**

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP=	x	=	_____

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	_____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : Extension of Time

1110.00

03/03/2009

REF ID: 00000000 1057723P

02 FC:1615

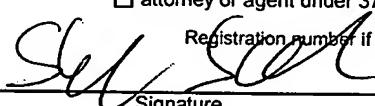
SUBMITTED BY		156.00 DD	Registration No. (Attorney/Agent)	62,497	Telephone	801-532-1922
Signature			Name (Print/Type)	Date February 27, 2009		
Steffen Soller						

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If you need assistance in completing this form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



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 <u>Steffen Soller</u> <p>Typed or printed name</p>		<p>February 27, 2009</p> <p>Date</p> <p>801-532-1922</p> <p>Telephone Number</p>																								
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<p align="center"><b>FEE TRANSMITTAL</b> <b>for FY 2007</b></p> <p align="center">U.S. Patent and Trademark Office 19</p> <p align="center"><b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b></p>		<b>Complete if Known</b>	
		Application Number	10/577,232
		Filing Date	4/26/2006
		First Named Inventor	Mertens et al.
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	E. Peselev
<b>TOTAL AMOUNT OF PAYMENT</b>		Art Unit	1623
(\$)		Attorney Docket No.	1963-9371US

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**Under 37 CFR 1.16 and 1.17**  
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#### **EEE CALCULATION**

## **1 BASIC FILING, SEARCH AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
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Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

## 2 EXCESS CLAIM FEES

**Fee Description**

**Each claim over 20 (including Reissues)**

Each independent claim over 3 (including Reissues)

#### Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
<u>23</u>	-20 or HP= <u>3</u>	x <u>52</u>	= <u>156.00</u>	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

**HP** = highest number of total claims paid for, if greater than 20.

Indep. Claims      Extra Claims      Fee(\$)      Fee Paid (\$)  
\_\_\_\_\_ - 3 or HP= \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

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**Total Sheets**    **Extra Sheets**    **Number of each additional 50 or fraction thereof**    **Fee (\$)**    **Fee Paid (\$)**  
 $\underline{\hspace{2cm}} - 100 = \underline{\hspace{2cm}}$  / 50 =  $\underline{\hspace{2cm}}$  (round up to a whole number) x  $= \underline{\hspace{2cm}}$

**4. OTHER FEE(S)**

## Non-English Specification, \$130 fee (no small entity discount)

**Other (e.g., late filing surcharge) : Extension of Time**

1110.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	62,497	Telephone	801-532-1922
Name (Print/Type)	Steffen Soller			Date	February 27, 2009

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